MISSOURI DEPARTMENT C ATURAL RESOURCES
P.O. BOX 176 (314) 7:2-3176
JEFFERSON CITY, MISSOU 6102 P.O. BOX 176

PARTI OFFICE USE ONLY

GENERATOR'S HAZAR DOUS WASTE REPORT SUMMARY SHEET

NOTE ► PLEASE READ INSTRUCTIONS AND EITHER PRINT OR TYPE					
Regardless of whether any off-site shipment occurred, as a registered generator of hazardous waste, you must complete, sign, and transmit this form to the Department of Natural Resources.					
SECTION A - REPORT IDENTIFICATION					
1. TYPE OF REPORT (CHECK ONE) 2. FOR THE PERIOD ENDING (CHECK ONE & FILL IN YEAR) 3. PAGE					
□ XXDARTERLY □ ANNUAL (NON-GENI (IF ANNUAL CHECKED, PLACE X IN 6-30 BC	☐ 9-30(YEAR) ☐ 12-31(YEAR) ☐ 1 OF3				
SECTION B - GENERATOR IDENTIFICATION					
4. GENERATOR'S NAME 5. GENERATOR'S USEPA I.D. NUMBER					
EATON CORPORATION	MOD55872204				
GENERATOR CONTACT PERSON (NAME)		TELEPHONE NUMBER		7. GENERATOR'S MISSOURI I.D. NUMBER	
Guy Gatlin		(417)256-7171		003119	
8. MAILING ADDRESS	CITY	СІТҮ		STATE	ZIP CODE
210 Allen Street	West Plains			МО	65775
9. PLANT ADDRESS	CITY			STATE	ZIP CODE
210 Allen Street	West Plains			MO	65775
10. NAME OF PARENT FIRM					OFFICE USE ONLY
EATON CORPORATION					
SECTION C - STATUS OF WASTE GENERATED (CHECK ONE)					
SHIPPED OFF-SITE. Complete part 2, attach 12. 13. REPORTABLE QUANTITY GENERATED BUT NOT					
XX completed hazardous waste manifests, sign certification and transmit to the department. REPORTABLE QUANTITY NOT GENERATED. Sign certification and transmit to the department. SHIPPED OFF-SITE THIS QUARTER. Sign certification and transmit to the department. (Do not complete Part 2).					
SECTION D COMMENTS					
14.					
State of the state					
APR 19 1996					
HAZARDOUS WASTE PROGRAM					
* SBOURI DEPARTMENT OF					
NATURAL PEROUS					
R00056958					
RCRA Records Center					
	E Vangorine a car				
SECTION E - CERTIFICATION STATEMENT					
certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe					
that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonments.					
PRINT NAME SIGNATURE DATE					
Guy Gatlin 4/16/96					
MO 780-1097 (6-88) DNR-HWG-11					